

142518

Unit No. 3111L

INCIDENT REPORT

TYPE OF INCIDENT GUEST INJURY FALL IN PARKING LOT		NAME OF HOTEL INCLUDING BRAND Courtyard by Marriott Nashua, NH		DATE REPORTED 1/16/07	
				DATE/TIME OF INCIDENT 1/16/07 7:45PM	
GUEST	NAME (FIRST, MIDDLE, LAST) KENNETH R ALTIZIO		ADDRESS 261 Hill St. MAHOPAC, NJ 08041		
NON-GUEST	SEX/DATE OF BIRTH 8/21/49		PHONE: (H) 845-216-9804 ext 1 ROOM NUMBER (W) 845-628-4161 H. 170		
EMPLOYEE	CHECK IN DATE 1/09/07		PURPOSE IN HOTEL Guests / BUSINESS		
(CIRCLE ONE)	CHECK OUT DATE 1/19/07				
	ATTITUDE (CIRCLE ONE) (C) CALM, (A) ABUSIVE, (D) DEFENSIVE, (W) WILL FILE CLAIM, (O) OTHER				
REPORTED BY	NAME (FIRST, MIDDLE, LAST) Samantha Rowen		ADDRESS		PHONE (H) (W)
WITNESSES	NAME		ADDRESS		PHONE
	1 GUEST OR EMPLOYEE (CIRCLE ONE)				
	2 GUEST OR EMPLOYEE (CIRCLE ONE)				
REPORT OF INJURY/ILLNESS	DEGREE OF INJURY (CIRCLE ONE) NO VISIBLE INJURY, BRUISES ABRASIONS, SWELLING, BLEEDING				
	APPARENT CAUSE Slipped on ice ADMITTED TO HOSPITAL YES NO - maybe				
	NAME/ADDRESS OF DOCTOR, CLINIC, HOSPITAL				
	VICTIM'S CONDITION (CIRCLE ONE) GOOD (F) FAIR SERIOUS CRITICAL				
	REPORTED CAUSE OF INJURY (use narrative if needed) Fall on ice getting out of car				
	FALL DOWN CASES INCLUDES FALLS IN TUBS, DOWNSTEPS, ON FLOORS AND IN PARKING LOTS				
	WAS AREA INSPECTED IMMEDIATELY? (C) YES NO BY WHOM Marc N				
	SURFACE CLEAN? DRY? OBSTRUCTIONS? HOLES? TRIP/SKIP HAZARDS? icy				
	TIME FLOOR LAST SWEEPED, MOPPED CLEANED BY WHOM				
	WHAT TYPE OF SHOES DID GUEST HAVE ON? sneakers DOES GUEST HAVE GLASSES? (C) YES NO				
FOODBORNE ILLNESS CRISIS INTERVENTION HOTLINE 800-309-4469	HAD THE GUEST BEEN DRINKING OR TAKING MEDICATION? NO				
	FOOD CASES				
	TYPE OF FOREIGN OBJECT:		DID YOU SEE IT? YES NO		
	WHO HAS IT		FOOD SUPPLIER:		DELIVERY DATE / /
	TOTAL SERVED:		SAMPLE AVAILABLE YES NO		WHERE?
	FOOD ILLNESS				
	DATE/TIME ILLNESS STARTED: / / AM/PM				
	SYMPTOMS				
	DURATION OF FOOD ILLNESS DATE/TIME FOOD EATEN. / / AM/PM				
	WAS TESTING DONE? YES NO RESULTS				
PHYSICIAN'S DIAGNOSIS					
VEHICLE	USED BY SUSPECT OR VICTIM (CIRCLE ONE)				
	LICENSE #				
	VEHICLE MAKE MODEL YEAR COLOR				
	IDENTIFYING CHARACTERISTIC OF VEHICLE				
	DIRECTION OF TRAVEL				
PROPERTY	TYPE OF PROPERTY VALUE				
	PROPERTY IN CUSTODY YES NO LOCATION PROPERTY WAS FOUND				
	DOES GUEST HAVE INSURANCE? CAR HOMEOWNERS COMPANY & POLICY NO.				

2/2/17 P. 02/17 689 9489 603 886

NASHUA MARRIOTT SALES

JAN-17-2007 16:48

01/25/2007

JAN-17-2007 16:49